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Current Air Force Combat Search and Rescue Challenges

by

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RESCUE CREED

It is my duty, as a member of the Air Rescue Service, to save life and aid the injured. I will be prepared at all times to perform my assigned duties quickly and efficiently, placing these duties before personal desires and comforts. These things I do…

THAT OTHERS MAY LIVE!

- Brig Gen Richard Kight, Commander, Air Rescue Service, 1 Dec 1946 – 8 July 1952

Contents

Page

Introduction

Air Force Rescue forces began their proud history with a simple creed '…That Others May Live", and the ethic it implies remains. The core competency required to rescue airmen behind the lines will never leave us as long as men and women fly in combat, but we can no longer let this isolate our thinking. While Rescue's requirements in Vietnam drove a focused recovery force devoted to the isolated airman behind enemy lines, the Rescue commitment is stronger than just that. Today, the Air Force has advanced in technology and air superiority against current threats to where our aircrews are no longer exposed to Vietnam era risk, but the joint environment presents a different challenge requiring the commitment to recover isolated comrades.

By late 1967, 325 F-105s were brought down over North Vietnam, mostly by Surface to Air missiles and AAA.[1] In contrast, during my 15 years and 10 deployments holding alert and abroad, I have waited with mixed anticipation to do even a single Combat Search and Rescue (CSAR). Our Rescue forces remain ready in theater, but the silent vigils we hold as the coffins roll out of Bagram and Baghdad are not for isolated airmen, they are for ground troops. The difference we can make in this fight is for those comrades.

To remain relevant, Air Force Rescue must further integrate into the joint fight, revamp our Command and Control, and give more strategic thought to Transformation. Our doctrine, our operational flexibility, and our equipment must evolve to match current and future Air Force Rescue challenges.

[1] Walter Boyne, "MIG Sweep, " *Air Force Magazine* 81, no. 11 (November 1988): 46

Current Doctrine and Operations

The current Air Force Doctrine Document (AFDD) 2-1.6, *Personnel Recovery Operations,* is over 3 years old, dated before former Chief of Staff General Moseley pulled CSAR back under Air Combat Command (ACC). The opening discussion of missions other than the recovery of Isolated Personnel (IP) stipulates: "By virtue of the inherent capabilities of [Personnel Recovery Operations] forces, they can accomplish other collateral missions. Historically, these collateral missions have included: casualty evacuation, civil [Search and Rescue], counter-drug activities, emergency aeromedical evacuation, homeland security, humanitarian relief, international aid, non-combatant evacuation operations, support for National Aeronautics and Space Administration flight operations, infiltration and exfiltration of personnel in support of air component commander missions, and special operations missions, including [Personnel Recovery] of special operations forces."[2] Despite the wide array and variety of missions listed, our training remains primarily focused only on the recovery of the downed fighter pilot. Our forces today are trained, organized, and equipped to carry out that mission. However, they have only accomplished one such recovery since Vietnam. That mission occurred during Operation Iraqi Freedom when a Navy F-14 Tomcat crew was forced to eject over the desert in Western Iraq. Air Force Rescue forces, including Sandy trained A-10 crews, were able to carry out a fantastic pick-up of both crewmembers, validating the core competencies alluded to earlier.

The skills required to accomplish the coordination and technical flying associated with CSAR are greater than any associated with the collateral missions listed. The amount of specific training, planning, and coordination to successfully accomplish this task well against opposing

[2] AFDD 2-1.6, 1 June 2005, page 3

forces in the short amount of time required cannot be overstated. It follows that crews trained, organized, and equipped to accomplish CSAR should be qualified to carry out the collateral missions with a minimum of additional training. It also follows that CSAR crews in theater should provide an additional resource to the Joint Force Commander (JFC) for these collateral missions when not conflicting with their primary mission. The most common collateral mission in theater is the joint mission of Army Medical Evacuation or MEDEVAC.

MEDEVAC is not Personnel Recovery (PR) by definition. PR is defined as: "the sum of military, diplomatic, and civil efforts to prepare for and execute the recovery and reintegration of isolated personnel."[3] Isolated personnel (IP) are those that: "US military, DOD civilians, and DOD contractor personnel (and others designated by the President or Secretary of Defense [SecDef]) who are separated (as an individual or group) from their unit while participating in a US-sponsored military activity or mission and who are, or may be, in a situation where they must survive, evade, resist, or escape."[4] MEDEVAC missions are typically from a secured base or landing zone where patients need to be evacuated, but are not necessarily isolated. Casualty evacuation (CASEVAC) involves the recovery of wounded personnel from point of injury (POI) such as an EID ambush site or remote Landing Zone (LZ) under fire during a Troops in Contact (TIC). CASEVAC or POI missions are a very appropriate use of CSAR forces, requiring our specialized talents, but we are not frequently requested by the Army for these missions, because of misperceptions of our capabilities and lack of familiarity with our Command and Control (C2), resulting in poor confidence and trust.

[3] JP-3-50, Personnel Recovery, 5 Jan 2007, page I-1
[4] Ibid.

Afghanistan

MEDEVAC missions have been carried out by Air Force crews in OEF for years. From June through December of 2000 my unit, the 210th Expeditionary Rescue Squadron, recovered over fifty survivors, most of which were local nationals. We reasoned that we needed to make the AOR our backyard, and we could best do that by flying missions which would also contribute to the joint and coalition effort. We flew as much as maintenance would allow, familiarizing ourselves with the terrain and the Forward Operation Bases (FOBs). We operated at night to reduce the threat, but concentrated these sorties on nights when the illumination was greater than 20%. This allowed us to increase our proficiency on nights when the Operational Risk Management (ORM) numbers were lower. It also meant that on the nights when the illumination was below 20%, and MEDEVAC calls were most likely due to Army restrictions on flying in those conditions, we would be going back to familiar areas. Other CSAR units; Active duty, Reserve, and Guard all flew with a similar mindset and result. The crews flew in the toughest weather, on real missions, with real adrenaline, saving lives of coalition and local nationals, gaining proficiency and pride in a way which all the training in the world could not have simulated. We contributed to the joint Fight. We became more prepared to do our primary mission. It was a win-win scenario for the Air Force and for the joint/coalition team. Most importantly to the CFACC, the impact upon his required alert to cover the fighters was minimal. The alert was always covered, even when the helicopters were concurrently supporting other missions.

Despite these obvious advantages, joint operations for CSAR have not been embraced fully. The reason, at the CFACC level, is the reluctance to accept the operational risk of having CSAR Forces mid-mission, supporting someone else when an Air component aircraft goes down, combined with the perception that the Army is capable of doing the mission, but chooses instead

to ask the Air Force for help only when it suits them.[5] I'll return to those issues, but first must address our other theater. The gap between our current operations and our doctrinal focus is different in Iraq.

Iraq

ACC requested a Quick Look Assessment from the Joint Personnel and Recovery Agency (JPRA) to consider the current CSAR doctrine and issues. The focus was Operation Iraqi Freedom and it found that the current PR stance is for Phase II/III operations, not Phase IV. The solution the assessment offers advocates the implementation of the draft National Security Policy Document (NSPD) – 12 Annex I, *United States Policy on Personnel Recovery and Prevention of Hostage Taking Abroad and Other Isolating Events.* The description of the problem is, according to the document: "CENTCOM personnel recovery capabilities related to Phase II/III (i.e. recovering aircrew and SOF) are robust. Capabilities unique to Phase IV environment (contractors, US civilians, kidnapping/hostage-taking, etc.) are challenged."[6] The document finds fault with several points on PR operations in OIF:

- Incentives are not aligned: Army is the Service most at risk yet the USAF is delegated authority as theater-wide personnel recovery decision-maker.
- Personnel recovery in Afghanistan, HOA, and Iraq is managed from an air operations center hundreds of miles from any of them.
- 180,000 contractors in CENTCOM AOR: no training, no plan. There is no personnel recovery POC in CENTCOM's Joint Contracting Command.

[5] Interview with Maj Gen Maury Forsyth, USAF, AWC President, (CENTCOM DCFACC Jun 07-08), 3 Dec 2008
[6] Marc DiPaolo, JPRA/J-8, Quick Look Assessment (draft), Attachment 1 to Tab B, 7 July 2008

- Policy gaps – specific requests for policy guidance regarding who is/is not covered by the Missing Service Personnel Act were made in May 04, Oct 04, Mar 05, Apr 05, Feb 06, Oct 06, May 08.
- MNF-I STRATOPS-PRD, [Personnel Recovery Division], is in a vice – works high visibility cases (e.g. Maupin) without tools to succeed; mission area undefined, positions unfilled, people not trained.
- Kidnapping/hostage-taking requires response akin to "INTERPOL criminal investigation: but Director position for MNF-I STRATOPS PRD specifies USAF pilot.
- MNC-I does not have the authority to launch the CSAR helicopters based near Baghdad.
- Insufficient operational priority for personnel recovery adaptation – top-down buy-in is lacking.

Recommendations from the Assessment include engaging the service chiefs for Commercial Off-the-Shelf Personnel Location Beacons (PLBs) for individuals, both civilian and military; and improving the evasion and escape training for DoD and civilian forces.[7] Along with these recommendations, the JPRC in Iraq is currently unsupported from a staffing perspective.[8]

Another issue entirely is Air Force CSAR forces are tasked to support other agencies to the point they have more than double the number of airframes in theater to accomplish their primary mission. The Rapid Extrication Deployment System (REDS) kit is a resource that some agencies look for in support of their operations. Since CSAR carries this kit, we can get tasked as a third string resource to repeatedly provide direct support. The lack of a REDS kit of a joint agency

[7] Ibid.
[8] Keith R. Lembke, LTC, Chief of Personnel Recovery, MND-B.

should not drive the ops tempo of our CSAR force. If that is truly all that is needed, the REDS kits should be purchased for theater and placed on Army Air Cavalry aircraft across Iraq. The Army has four Aviation Brigades in Iraq.[9] Helicopters are not in short supply in OIF. One unit of Air Force CSAR could cover the theater adequately for the CFACC's purposes, allowing us to begin pulling the CSAR forces out that are not needed to cover the OIF's MEDEVAC and civilian PR requirements, but are needed in OEF.

The joint PR problem in OIF is not a lack of helicopters; it is more about focus and the infrastructure of the Command and Control. Joint PR is more than just the capability of recovering Air Force and Navy fighter pilots. In Iraq, the C2 and ability to direct PR for the civilian and Army personnel reside best inside a theater JPRC like the MNF-I JPRC.

Jointness

Air Force Issues

The goal of making Air Force CSAR forces a viable joint asset should begin in our own command and control structure. The current PR fight is centered on support to the ground forces. The centralized control we maintain does not meld particularly well with how the Army normally operates their PR C2. Our construct in CENTCOM maintains OPCON and TACON of CSAR forces at a level outside of the chain of command of the OEF and OIF ground commanders. While assets originating outside the specific theaters will still require apportionment and allocation at the CENTCOM JFC level, assets sitting on the ground in each theater should be more reliably responsive to the respective theater 4-Star commanders. With command authority in theater, the chain of OPCON is shortened and doctrinally correct

[9] Interview with Col Bob Johnson, USA, AWC faculty, 21 Nov 2008

relationships between the Rescue squadron commander, the staff, and the CFACC can be better maintained. The current construct, while maintaining a centralized control per our intended doctrine, becomes a hindrance to our supported agency, whose joint PR operates with a decentralized structure. My recent experience (1 April – 5 July, 2008) as the squadron commander in OEF for the CSAR forces made this evident on several occasions. My OPCON and TACON were through the JPRC to the CFACC/DCFACC. This enabled a short command cycle when a CSAR event was occurring, but did not prevent the blurring of ADCON and OPCON through the Wing/CC at Bagram for other issues.

The operational flexibility to conduct inter-fly coordination for Rescue Escort (RESCORT) familiarization with the rotating A-10 or Apache squadrons proved overly difficult. As soon as I started to coordinate with the JPRC, (who took my ATO inputs and obtained DCFACC approval for anything unusual), the DCFACC called the Wing/CC asking why his Rescue guys were training in theater and taking away gas from his CAS assets. Of course, the whole process would stop while our WG/CC and OG/CC tried to respond to the 'crises'. The unintended effect was to paralyze my ability to prepare and coordinate with RESCORT forces. I tried three different times over three months, staffing good plans, with minimal impact upon the CAS lines or Apache squadrons and was unable to get a 20 minute formation put together. The absence of direct access and trust with my operational commander was the root cause of this problem.

I brought this example to my interview with Maj Gen Forsyth, who was my DCFACC last Spring, and sought his perspective. While we both agreed that the prohibition on training in theater is a factor, the necessity of coordination for RESCORT was a valid request and should have been an accomplishable task. The ability to sit down face to face with my operational commander immediately overcame the two separate bureaucracies of either chain of command

by the simple effect of building trust and a working relationship. The JPRC did not have the relationship or the drive to sell the RESCORT requirement to the DCFACC, and the Wing/CC had too many other issues to make it a priority. My regret from that tour is not visiting the CAOC on my way into theater so I could have established the relationship immediately and had the credibility to communicate with the DCFACC when required. As Maj Gen Forsyth said during the interview, "You should have come down to sit in the battle cab!" The value of face to face relationships and trust were his biggest lesson during his year as the DCFACC.[10] Having a better relationship certainly would have been beneficial, and alleviated a more complex, further reaching issue with the Army as well.

One main point of contention between the Air Force and the Army was how much our Air Force CSAR forces would be allowed to support the Army and their MEDEVAC mission. As described earlier, the opportunity for us to help the Army is also a winning recipe for us to make a difference in theater while getting better at our primary job of CSAR preparedness. The issue, in this case, was more political. The staff A3 was directed to solve this issue but the distance and lack of familiarity into how to collaboratively negotiate with the Army prevented its resolution while I was there.

The Air Force was trying to divest itself of an In-Lieu of mission at Kandahar and the CAOC wanted to leverage our ability to do MEDEVAC at Bagram, reasoning we could cover the Army's MEDEVAC in Kandahar with the Air Force CSAR aircraft while operating under CFACC OPCON/TACON. The Army's perspective was that we obviously couldn't to MEDEVAC because whenever they call us, they have to ask - not direct, and we always have a caveat that keeps us from being off the ground in the time frame that they require. I'll cover the way the Army does their MEDEVAC in more detail later, but the end result was that we were

[10] Interview with Maj Gen Maury Forsyth, USAF, AWC President, (CENTCOM DCFACC Jun 07-08), 3 Dec 2008

never able to arrive at an agreement to support their missions without a caveat and because of that, undermined the whole argument that we could provide the support they needed at Kandahar.

The A3 himself joined me unexpectedly during a negotiation, just as I was coordinating the latest MOU with the 101st PRCC Director, and ensured its failure by undermining the trust I had just established. Working through the JPRC, I was never able to make the CFACC, or his staff, understand just how we were working against ourselves. Had the OPCON Commander and I been able to have a face to face relationship, I would have been able to better communicate what was required to both serve the JFC's intent and to gain OPCON of the forces allocated to the In-Lieu of mission. My discussion with Maj Gen Forsyth also covered the Joint Force Commander's appointment of the Air Force Component as the responsible agency for joint PR, and ownership of the theater JPRC.

The Air Force PRCC has traditionally filled this role because the CFACC (with the preponderance of Air assets) runs the CAOC and the JPRC is usually placed there. Maj Gen Forsyth felt that we should retain that joint mission. Doctrinally, however, each component commander's PRCC should: "Be prepared to establish a JPRC if directed or if designated as the joint force supported commander for PR. This will not negate the requirement to perform component PRCC functions as well. This will require that the education, training, and staffing requirements of component PR staffs be maintained to meet the requirements of this be prepared to mission."[11] I make this point because it is the Army that has the preponderance of PR *events*, and does the great majority of PR in both Iraq and Afghanistan. The MNF-I JPRC was stood up by the OIF Commander to focus on those who most required PR support in OIF. I believe it is

[11] JP 3-50, Personnel Recovery, 5 Jan 2007, page II-7, (5)

only a matter of time before the Army PRCC at the JOC in Bagram is declared the OEF JPRC by the NATO/OEF Commander.

The problem remains that OPCON of the CSAR forces is still outside the AOR of each respective theater JFC, but this would begin to clear up the issue of trying to run concurrent PR operations in Iraq and Afghanistan. The JPRC at the CAOC is too far removed, with too complex and varied issues between the two theaters. The mission of Air Force CSAR should stay at the CAOC with the Air Force PRCC, but the joint PR missions in the respective AOR's are much different and require simple face to face coordination and trust that just doesn't work well from outside the country. Even simple problems, such as a single SATCOM frequency allocated for PR, are unnecessarily difficult. (Communications jamming from our sister squadron in OIF occurred on almost every mission we flew in OEF in April, May and June of 2008.)

It is important to recognize that the Army PRCC does not operate with the same mindset as the Air Force JPRC. The authority to launch assets does not come through them like it does the JPRC. They are simply a force provider to the Task Force Commander requesting the assets. The TF/CC's authority is all that is needed. The Joint Operations Center (JOC) leadership (Army two-star) does not get involved unless the Task Force Commander *doesn't get what he needs.* One solution would be for the CFACC to have a Memorandum of Understanding (MOU) with the Army PRCC (as the theater JPRC) allowing them TACON to launch CSAR assets when not in conflict with an Air Force PR event. According to doctrine: "A component experiencing an isolation event within its force or operational area may be able to conduct the recovery mission without external support. However, if two or more components are involved, the JPRC must coordinate the augmentation of forces and recommend PR mission-specific supported and

supporting command relationships to the JFC or designated supported commander for PR. Respective component commanders normally retain OPCON of their forces and the JFC or designated supported commander for PR will delegate TACON of participating forces to the supported commander."[12]

We do similar actions when we release TACON of aircraft deploying weapons for CAS to an Air Force SSGT on the ground, these same Joint Tactical Air Controllers (JTACs) should be the first to call in Air Force Rescue for a hot LZ CASEVAC. This mechanism takes advantage of a coordination structure already in place and would: 1) give the joint ground forces the ability to call us in a rapid manner and, 2) have someone on the ground that understands how to use Air Force CSAR for an opposed extract. JTACs are in the fight, have the communications, and are Airmen. Best of all for the joint forces, they are already a trusted part of the team. The operational flexibility of using the joint structure in place would seem to complement both the idea of the Army's decentralized control and execution and the Air Force's requirement to retain centralized command.

Lastly, our own Rescue folks themselves have to embrace the philosophy behind doing the joint mission. There are those at all levels who believe that we should only concentrate on training for our core mission. I even experienced this with a crop of new PJs that joined my squadron in theater for the last two months of my deployment. They were angered at some of the perceptions that the Army had of their training and didn't see any benefit to transporting injured coalition and Army guys that had already been 'packaged'. They only wanted to launch if they got to hit the ground, shoot, move, communicate, and provide field trauma medicine to patients in the field (what they were trained for). This lasted for a while until they had to keep patients alive that had holes through them from RPGs, shrapnel, 7.62, and multiple amputations.

[12] Ibid., page III-2, (2)

Suddenly the value of critical care was evident, as was the challenge that they saw in new medical skills. I pointed out the alternative (of doing nothing except sitting alert) and it was an easy sell.

Army Issues

I have alluded to the fact that the decentralized way the Army looks at MEDEVAC is much different. We cannot dismiss that or we will not be able to bridge the understanding gap with our primary joint PR customer. Each Army regional ground Task Force Commander inside of Afghanistan is an O-6 with an allocated set of Army air assets under his control. These assets are allocated to each maneuver commander by the Army Air Brigade commander in Bagram in order for him to accomplish his mission.[13] Those assets may include MEDEVAC squadrons, Pathfinders, and Downed Aircraft Recovery Teams, (DART). If they have a PR event, the Task Force provides the C2 to execute the recovery whether it's a helicopter shot down or an Improved Explosive Device (IED) taking out a ground convoy. They will most likely respond with a Quick Reaction Force (QRF) made up of appropriate assets, usually a ground QRF. The TF/CC doesn't call the PRCC at Bagram to request any assets unless he can't do the mission with his own.

Air Force PR views the problem in terms of centralized command and control. We see a Troops-In-Contact (TIC) with a wounded soldier and incorrectly think the TF/CC has to request air assets through the JOC at Bagram for CASEVAC/MEDEVAC because that is how we would do it. Instead, the TF/CC is going to ground-evacuate the wounded with a QRF convoy (under his direct control) back to the nearest Forward Operation Base (FOB), then have them moved by MEDEVAC helicopter to a Field Surgical Team (FST) or all the way back to Bagram, if

[13] Interview with Col Bob Johnson, USA, AWC faculty, 21 Nov 2008

necessary. The only time the PRCC may task someone is for the last movement either from the FOB or from the FST back to Bagram, and only then if the MEDEVAC helicopters they launch originate from a location outside of that TF/CC's battlespace. The TF/CC will not consider using Air Force CSAR to pull guys out of a hot LZ, because he wouldn't typically use helicopters for that. He'd use the ground QRF because he doesn't want to risk the air assets, his own or someone else's.

While we were in OEF this year a Chinook was brought down. The On Scene Commander was the Apache escort that took up a covering position overhead. Despite the ability of the Apache to have the aircrew clip in their harness into attachment points and ride out externally, the TF/CC waited until the ground QRF *drove* to the area and secured the LZ before sending the DART team and evacuating the crewmembers on a CH-47. They spent at least an extra hour in the LZ than they would have had AF CSAR been scrambled. The hotwash concluded that the CSAR assets should have been used, but still the PRCC could not *direct* the use of our helicopters into that commander's battlespace. The TF/CC's reluctance to put an air asset into this kind of situation may have been because of his previous experience with an Army H-60 being shot down attempting a recovery.

Army MEDEVAC birds have similar countermeasures to Air Force Pavehawks, but lack any door guns whatsoever.[14] The Pavehawks, flying with mini-guns or .50 cal door guns, are able to assume more tactical risk. In any case, each Task Force commander has his own MEDEVAC and other assets *allocated* to him, and so it is unlikely that he will think to pull assets he's unfamiliar with from outside of his battlespace. The Army's execution of MEDEVAC is truly decentralized, and it doesn't occur to them to go to a centralized PRCC until they feel that they can't do it on their own. For us to be involved we will have to set aside some of our procedural

[14] Ibid.

mindsets; then it will come down to education and trust. That means allowing a small measure of control, or at least predictability, to the PRCC, who is quite capable of providing C2 on the very missions for which they requested us. They are better integrated than the Air Force JPRC with the medical elements of the theater, and work closely with them for the transfer of patients from the field to the main hospital in Bagram.

I spent a lot of time at the 101st JOC, working with the PRCC director. They don't understand why we don't think of them as joint. They are, after all, in a Joint Operations Center. They had an Air Force controller working the desk who had just completed a tour at the CAOC JPRC, the Air Liaison Officer was in the JOC and their situational awareness of the theater was better when it came to where the Army forces were that needed support. They are also tied in to the Air Support Operations Center (ASOC) and not only see the TICs just as quickly as the JPRC, but also have representation from the Army units which own the battlespace. The Air Support Operations Center (ASOC), obviously, is part of the JTAC connectivity to the fielded forces and further reinforces the argument for close joint association between them and the Army PRCC.

An unexpected obstacle to joint PR is the Army MEDEVAC personnel's perception of Air Force CSAR. We may think we're 'helping them out', but they think we're honing in on their mission. Those incorrect rumors persisted throughout the MEDEVAC community despite all our efforts. It was a great advantage to go over and shake hands with the Army and get to know our partners in order to solve these types of issues. Emails and phone calls leave much to chance and the feedback you get from a face-to-face meeting cannot be replaced. After one particular mission, a local national who was severely injured in an IED ambush died on the way back to Bagram under the care of our PJs. The rumor became that our guys weren't trained for critical

care transport. This was partially true, although the real blame fell squarely on those who failed to prepare the patient for transport, but we battled that perception until I left. I met with the MEDEVAC commander of Afghanistan and the chief Flight Surgeon for his operation to try to solve these issues. While the commander, a Major, was very professional and obviously competent, he did not want to share the mission with anybody he couldn't trust to take care of 'his' patients. This perception persisted because the Flight Surgeon, a Captain, discounted the PJs training and capability and refused to listen to any evidence to the contrary. It did not help our cause when we failed to recognize another factor from the Army's method of running MEDEVAC.

Most of the critical patients that have to be moved from the FOBs back to Bagram are unconscious, medicated, ventilated, and on a monitoring system called a Pro-Pack. Ventilators and Pro-Packs are accountable items, and moving them from one battlespace to another requires an exchange. We have our own gear, but reserve that in case we get vectored off of a MEDEVAC to a CSAR event while airborne. This does not sound like it should have been that big of an issue, but it was quite serious to them. We always gave the equipment to the hospital (it was attached to the patient, of course), but the FOB we had just transported the patient from now was down the equipment they needed to support the next patient, and they didn't keep more than a few of the systems on hand at a time for logistical reasons. This problem looked insurmountable because we couldn't get more systems of our own into country easily. A good relationship between our Flight Surgeon and the Bagram Hospital turned out to make it quite an easy solution. They had plenty of the systems on hand, and we simply checked out six of their systems and flew with them for the express purpose of being able to exchange them with the FOBs during MEDEVACs. The point is, we aren't going to change the way the Army does

MEDEVAC, so if we are going to support it we have to learn how, why, and what needs to be done to let us integrate into their operations and help the troops on the ground that need us, Army or otherwise. For PR operations, that is Jointness.

Joint Technology

The last major issue under the joint heading involves technology. The Air Force has been unable to standardize the survival radio our forces use. The HOOK and CSEL will both be with us for the immediate future. The theater's Special Instructions (SPINS) were still being updated as of last June to accommodate the different technologies. The CSAR event I described involving the Chinook was evidence of one of the challenges in this area. Although the crewmembers all carried a radio, none of them knew how to use it, probably since the majority of crews don't see that particular radio prior to getting to theater.[15] Eventually, one of them simply put it on Guard and was able to bring up the Apache circling overhead. The JPRC was alerted to the fact that a radio was active, but did not receive accurate coordinates for the radio.

Complicating the issue, each ground convoy running around rural Afghanistan has different means of communications and procedures. Most are simply supposed to check in with the Task Force TOC as they hit checkpoints, giving ETAs and routing for the next leg. Other's have Personnel Locator Beacons (PLBs), SATPHONEs, or cell phones. As I left theater this was an issue we, and the 101st PRCC, were struggling with for very real reasons.

A convoy had just been ambushed and a Predator caught the gruesome reality on video. They were in between radio checkpoints and had no direct way to contact their TOC for help. The time elapsed may or may not have made a difference to the outcome in this particular instance, but it brought to light the possibility of an isolated convoy losing people due simply to

[15] Interview with Col Bob Johnson, USA, AWC faculty, 21 Nov 2008

the inability to communicate their plight. Had they been able to send out a call for help, the problem then becomes getting to them. Solving that problem requires transformational speed.

Transformation

A Leap in Technology

Right now the CSAR-X is finalizing its third selection process. One comment that has been heard around the HH-60 Weapons School community regarding the three contenders is that "I hate them all equally"[16]. I believe the reason for this has its roots in our biggest limiting factor, speed. We had an option to solve this problem with the CV-22, but there were too many downsides to it. Many performance parameters like power, downwash, weight, and lack of pressurization made it too much of a compromise. The three contenders are all steps up in many ways from the current HH-60G, but they do not have the leap forward that we should be looking for out of a next generation machine for Joint Personnel Recovery.

Speed solves several problems for us, starting with range. Bigger range means less numbers of airframes, less numbers of people, and less overall cost. We all know this comes down to dollars. It allows us to get high, loiter, save fuel, and deploy Pararescuemen (PJs) in a similar manner to the HC-130. This might even allow us to trim the HC-130 out of the equation, saving more money. It allows us to self deploy airframes instead of relying on C-5s or C-17s. But, the biggest reason speed is important is still that it will allow us to save lives we otherwise would not be able to save.

With a leap in speed that allows us to hover, hoist, and refuel/operate from Army Forward Operation Bases (FOBs), we would truly change the capability of the Rescue force. Similar to

[16] I attribute Col Tim Healy with the original quote

the way the F-22 has made a leap in technology compared to the F-15, we need to look for ways to overcome the true challenges to our changing mission while doing things smarter and saving money in the long run. Buying a 140 knot helicopter, the HH-47 for instance, will be marking time. That basic airframe was introduced in Vietnam. Technologies on the commercial market are available, such as the 250 knot Sikorsky X2 concept,[17] which point to what is becoming possible. Along with speed, situational awareness is where we should be allocating design resources. Data link capabilities provide a new horizon beyond normal situational awareness. Call it situational synchronization. Linked weapons systems allowing real time location of friendly and enemy forces, instant information passage, and glass cockpits all reduce the fog of war and reduce time wasted getting to the survivor. The development money for a leap in technology will be the hurdle we have to overcome. Joint utility may be the best way to get it.

Solving the Money Problem

Our force now is about 103 helicopters, the CSAR-X is asking for 141 to meet the requirements currently across the globe. The bill is going to be correspondingly huge, but the justification is there if we consider the joint service provided. Those who advocate for a focus only on the CSAR mission to organize, train, and equip must realize we cannot justify a single mission airframe that costs hundreds of millions of dollars. The Joint Strike fighter is an example of a program using other DoD assets and even other countries to help fund the up-front costs of such a venture. The Army and Marines are also working together under the Joint Heavy Lift program right now as an example of how we might approach this problem. Many of the stated objectives parallel our own. The JHL is "…intended to overcome enemy anti-access strategies, execute operational maneuver…aerial delivery and sustainment operations. The

[17] Blair Watson, 28 April 2008, www.aviation.com/technology/080428-sikorsky-x2-helicopter.html

ability to achieve military objectives in future combat environments requires the rapid delivery of Joint-Interagency-Multinational forces and distributed tailored support packages. A joint force capable of full spectrum dominance must possess unmatched speed and agility in positioning and repositioning tailored forces from widely dispersed locations to achieve operational objectives quickly and decisively. With the ongoing transformation of joint forces to be lighter, more lethal, and capable of deploying from multiple dispersed locations worldwide, the need for a JHL solution has been recognized by the services and documented in the form of a draft JHL initial capabilities document (ICD).

The costs for Defense Department weapons systems, including rotorcraft, continue to escalate making it imperative that the Department take advantage of any and all means including reducing the number of system development programs where it makes sense to contain costs. Additionally, the Department must take advantage of economies of scale in production."[18] It seems that others are working toward the same type of goals in technology that we are. Taking advantage of that is smart, efficient, and financially required.

Conclusion

Advocating joint-ness and moving joint support up higher in priority is not new. An excellent paper was written in 2005 from Air War College that emphasized this point.[19] Despite that, our doctrine and mindset supporting our joint partners have lacked inertia. This is partially the fault of those of us at the lower level to recognize and champion a change in paradigm. Those interested in making a difference in our mission must take the time, effort, and risk to

[18] http://www.globalsecurity.org/military/systems/aircraft/jhl.htm
[19] Col Lee DePalo, "USAF Combat Search and Rescue", *The Maxwell Papers,* September 2005

educate senior leaders outside of our community who don't always truly understand the issues we have, both to meet our core competencies and to support the joint fight at the lower levels. That includes sending quality people and/or volunteering for duty in theater at the JPRC or other posts that can affect leadership's mindset and our advocate our operational flexibility. The JPRC must be manned by CSAR professionals who have the thick skin, confidence, and credibility to successfully represent PR issues to CFACCS and DCFACCs amidst a very high stress environment.

Our PR C2 structures in OIF and OEF do not adequately support the JFC's mission. There are varying opinions on how to fix the lack of OPCON of Rescue and other air assets that are specific to each theater. Full papers are being written on that issue, and it is the source of great interest at the Air Force staff level, so I do not tackle it fully here. However the solution manifests itself, the joint mission must be served better, and moving some form of Rescue's OPCON to the OEF and OIF theaters will allow personal, professional, and doctrinal relationships to overcome existing OPCON issues.

The word 'preponderance' is used by doctrine as justification for the functional command of forces in a COCOM. We must use it again to recognize that the preponderance of PR that exists in OIF and OEF belongs to the Army. We must then advocate and support their PRCCs as the proper leads for PR, facilitate the legitimate and responsible MOUs providing doctrinal access of our PR forces to the OIF/OEF 4-Star Commanders, while maintaining our ability to respond to the Air Force component CSAR and PR requirements of the CENTCOM CFACC.

That commitment also entails the responsibility of educating both the theater Task Force Commanders and the theater JPRCs to use us in the CASEVAC role as a primary resource, still allowing them to use us for MEDEVAC as a secondary role. We can also facilitate this through

our own Air Force channels, using the ASOC and the JTACs, to make Air Force Rescue the primary resource for POI evacuation of wounded ground troops from potentially contested LZs and for recovery of downed joint aircrews.

The evolution of our mission is a joint one. Programming joint money and joint requirements into our next aircraft is the only fiscally and professionally responsible option. We must have a leap in capability that matches the future operational flexibility our mission will require.

We must always provide the Air Force a capability for traditional CSAR, even if small wars requiring less capability are currently the norm. Our capabilities will also be required for humanitarian efforts, global crisis, and a variety of unknown man-made and naturally occurring disasters. Operational flexibility to accomplish a range of possible missions in support of joint and coalition objectives during war and peace must be designed into our mission, our mindset, and our next weapons system. Joint operations will be the future and the measure of how well we execute this planning.

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